1716	Nedwoson Act of 1998, no per NT APPLICATION P Substitute	EE DETERMINA for Form PTO-876	TION RECORD	normation unte	Application	KIMENT OF COMM Walld OMB control no K. Dockel Number
APF	LICATION AS FILED -	-PARTI			110153	5 151
FOR	The second secon	(Oolumn 2)	SMALL	ENTITY	O R	OTHER THAN
BASIO FEE 187 OFR 1.18(a), (b), or (d))	HUMBER FILED	NUMBER EXTRA	RATE (1)	FEE (1)		SWALL ENTITY
BY OFR 1.18(K), (I), or (mil					RA	TE (1) FEE (
BY OFR 1.18(d), (n), or (m)					<u> </u>	
OT OFR 1.18(1)					.	
NDEPENDENT CLAIMS	rilnus 20 =	•	x 05%		OR X G	7
UPPLICATION SIZE	If the specification and desheets of paper, the ann	roudnes	x 100 =		-	. ~ I #
EE 37 OFR 1.16(s))	IS \$250 (\$100 form	icauon size fee due			xcol	00.
	additional 50 short	""" tor each	11 - 1		. [
ULTIPLE DEPENDENT O	35 U.S.C. 41(a)(1)(G) an LAIM PRESENT (37 CFR 1.16	0.87 CFR 1.16(6).				1.
If the difference in column	I is less than zero, enter "0" in	01)	180		5/	
ADDITO	eness than zero, ender 40. It	column 2.	TOTAL		36	20
- SCZ POLICATI	ON AS AMENDED - P	ARTII			TOTA	L
	mn 1) (Colu	(Column 3)				
IN UP REM	AIMS HIGH	EST	MALL ENT	TTY C	OR OT	HER THAN ALL ENTITY
1-1 A 640-44	DMENT PREVIO	USLY FXTRA	RATE (\$)	ADDI: IONAL	RATE (
Total ar CFR (.160) Independent ar CFR (.160)	O . suniM	() =	x 25 =	EE (\$)		AOOL TIONAL FEE (\$)
	5 Minus *** /	2 =	10	OR	~	= (3)
Application Size Fee (37	CFR 1.16(s))		× to v=	OR.	x 020	2
THE SENIATION OF	MULTIPLE DEPENDENT CLAIM	(37 CFR 1.16(II)	180	1	-	
	1		TOTAL	OR	360	
(Colum CLAI	n 1) (Colum	n 2) (Calumn 9)	ADD'L FEE	OR	ADD'L FEE	
REMAII AFTE	AING NUMBE	R PRESENT				
Total AMENDI	MENT. PREVIOUS	SIY EXTRA	ΠO	DDI NAL	· RATE (\$)	ADD(-
tridependent fix OFR 1.16(N)	: Minus **	=	FEE	(\$)		TIONAL FEE (\$)
	Minus. 444	=	X =	OR OR	X =	1
Application Size Fee (97 C	FR 1.16(s))		X =	OR	X =	
TOTAL MINISTRA	JLTIPLE DEPENDENT OLAIM (3	7 OFR 1.16(II)				
			TOTAL	OR (-	
if the entry in column 1 is le If the "Highest Number Pray	ss than the entry in column 2, dously Paid For IN THIS 8PA lously Paid For IN THIS 8PAC usly Paid For Motal or Indepe	Wille *0* in column a		OR	TOTAL ADD'L FEE	
The Hillehand blund	Hously Paid For IN THIS SPA lously Paid For IN THIS SPAC usly Paid For Molal or Indep ulred by 37 OFR 1.16. The k	OF to lease the second of				1

The "fighest Number Previously Paid For" (Notation Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by line including gathering, preparing, and submitting the completed application of the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the law the individual case. Any comments and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS